

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Sm		9/10/00
O.I.P.E. CLASSIFIER		8	9-14-00
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW		6-18-94	10-2-01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1	✓	7/6/00	
2	0	5/4/00	
3	0		
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Best Available Copy

If more than 150 claims or 10 actions  
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